



ILLINOIS ENVIRONMENTAL PROTECTION AGENCY

Livestock Facility Inspection Checklist

GENERAL INFORMATION

TYPE OF INSPECTION:

☒ CAFO ☐ COMPLAINT ☐ RECONNAISSANCE ☐ ERU FOLLOW UP ☐ OPERATOR REQUEST ☐ OTHER

FACILITY NAME (LLC, Inc., Corp, Partnership, sole proprietorship, etc.)

Christensen Farms Midwest, LLC. - Bell Ridge

INSPECTION DATE

May 30, 2012

ARRIVAL TIME

10:38 am

ADDRESS

2209N 460th Street

INSPECTOR(S)

Holste

DEPARTURE TIME

12:15 pm

CITY

Kansas

STATE

Illinois

ZIP CODE

61933

ACCOMPANIED BY (if applicable)

Adam Barka & Mike Evans

COUNTY

Edgar

SECTION

NE 32

TOWNSHIP

13N

RANGE

12W

POLITICAL TOWNSHIP

Symmes

TEMPERATURE

70's

PRECIPITATION TYPE

None

Facility Owner(s):

Exemption 6 and Exemption 7(C)

NAME

Christensen Farms Midwest, LLC.

CONTACTED

☒ YES ☐ NO

PHONE

Exemption 6 and Exemption 7(C)

MOBILE

ADDRESS

Exemption 6 and Exemption 7(C)

CITY

Exemption 6 and Exemption 7(C)

STATE

Exemption 6 and Exemption 7(C)

ZIP CODE

Exemption 6 and Exemption 7(C)

NAME

Exemption 6 and Exemption 7(C)

CONTACTED

☐ YES ☐ NO

PHONE

Exemption 6 and Exemption 7(C)

MOBILE

Exemption 6 and Exemption 7(C)

ADDRESS

Exemption 6 and Exemption 7(C)

CITY

Exemption 6 and Exemption 7(C)

STATE

Exemption 6 and Exemption 7(C)

ZIP CODE

Exemption 6 and Exemption 7(C)

Facility Operator(s):

Exemption 6 and Exemption 7(C)

NAME

Exemption 6 and Exemption 7(C)

CONTACTED

☐ YES ☐ NO

PHONE

Exemption 6 and Exemption 7(C)

MOBILE

Exemption 6 and Exemption 7(C)

ADDRESS

Exemption 6 and Exemption 7(C)

CITY

Exemption 6 and Exemption 7(C)

STATE

Exemption 6 and Exemption 7(C)

ZIP CODE

Exemption 6 and Exemption 7(C)

NAME

Exemption 6 and Exemption 7(C)

CONTACTED

☐ YES ☐ NO

PHONE

Exemption 6 and Exemption 7(C)

MOBILE

Exemption 6 and Exemption 7(C)

ADDRESS

Exemption 6 and Exemption 7(C)

CITY

Exemption 6 and Exemption 7(C)

STATE

Exemption 6 and Exemption 7(C)

ZIP CODE

Exemption 6 and Exemption 7(C)

NPDES PERMIT INFORMATION (If no NPDES Permit, skip this section)

1. What type of NPDES permit has been issued?

☐ Individual NPDES Permit

☐ General NPDES Permit

NPDES #

2. What date was the NPDES permit issued?

3. What date does the NPDES permit expire?

4. Is a copy of the NPDES permit onsite?

☐ YES

☐ NO

5. Permitted number of animals (no. & specie)?

6. Does the NPDES Permit contain a compliance schedule?

☐ YES

☐ NO

7. Have there been any changes made to the production area since the permit was issued?

☐ YES

☐ NO

If "YES", provide a detailed description of those changes.

None

LAND APPLICATION/NUTRIENT MANAGEMENT		
1. How many TOTAL acres are available for land application?	<u>580</u> acres	
2. How many acres are READILY available for land application at the time of inspection?	<u>353</u> acres	
3. Estimated annual quantities of liquid waste	<u>5.7 million</u> gallons	
4. Estimated annual quantities of solid waste	<u>0</u> tons	
5. Does the facility have a contractor perform land application? If "YES", Name of Contractor: <u>Ormiston Ag</u>	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
6. What type of land application equipment is available to the facility? <input checked="" type="checkbox"/> Umbilical Injection <input type="checkbox"/> Honeywagon Injection <input type="checkbox"/> Honeywagon Surface <input type="checkbox"/> Irrigation <input type="checkbox"/> Rotational Gun <input type="checkbox"/> Manure Spreader <input type="checkbox"/> Vegetative Filter <input type="checkbox"/> Other _____		
7. Does the facility calibrate the land application equipment? If "YES", What method is used? Flow meter on application equipment.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
8. Does the facility land apply within the 150 foot setback from any water well? If "YES", Explain	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
9. Does the facility land apply within the 200 foot setback from any surface water? If "YES", Explain	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
10. Does the facility land apply near any residences? If "YES", Explain Use direct injection and work with neighbors.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
11. Is livestock waste transferred off-site to another party? If "YES", Are records of manure transfers kept? If "YES", Ask to see records	<input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> NO
12. Does the facility have a current NMP or CNMP? If "YES", Does the facility maintain a copy of the nutrient management plan (NMP) onsite?	<input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO <input type="checkbox"/> NO
13. Does the NMP reflect the current operational characteristics (number of animals, cropping, etc.)?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
14. Are the number of acres owned/leased consistent with those in the NMP?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
15. Is manure and wastewater being applied in accordance with setback/buffer requirements of the NMP?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
16. Are all of the records identified in the NMP being maintained and kept current?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
17. Are records being maintained at the required frequency?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
18. Are records being maintained onsite for the period required by NMP and/or NPDES permit?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
19. Is the NMP adequately addressing the storage, handling and application of manure and wastewater to prevent discharges to waters of the U.S.?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

[illegible]

Does the facility have any other locations under common ownership, or where equipment and/or manure is shared, or where the other site shares land application sites? If so, put names and addresses below. None	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
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1.	Does the facility have any existing livestock waste containment system? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If NO, then proceed to question 10.
2.	General description of the waste containment system (include solid and liquid manure handling, mortality, and feed storage areas). All buildings have pits beneath them. The sow units are a pull-plug type that are tributary to a two stage lagoon system the Isolation buildings have their own pits not connected to the lagoon system. Liquid livestock waste from the Iso units is transferred to the lagoon system with a tank wagon.

Type of Storage	Total Storage Capacity (Specify Units)
<input checked="" type="checkbox"/> Anaerobic Lagoon	21 million gallons
<input type="checkbox"/> Covered Lagoon	
<input type="checkbox"/> Holding Pond	
<input type="checkbox"/> Above Ground Storage Tank ("Slurrystore")	
<input type="checkbox"/> Below Ground Storage Tank	
<input type="checkbox"/> Settling Basin	
<input type="checkbox"/> Roofed Storage Shed	
<input type="checkbox"/> Concrete Pad	
<input type="checkbox"/> Impervious Soil Pad	
<input checked="" type="checkbox"/> Underfloor Pits	Waste transferred to lagoon system
<input type="checkbox"/> Anaerobic Digester	
<input type="checkbox"/> Manure Stacks	
<input type="checkbox"/> Vegetative Filter	
<input type="checkbox"/> Other _____	
<input type="checkbox"/> None	

3. Do the storage structures have depth markers or staff gauges? ☒ YES ☐ NO

4. Are levels of manure in the storage structures recorded and records kept? ☒ YES ☐ NO

5. Do the storage structures have adequate freeboard? ☒ YES ☐ NO

6. Estimated final stage storage structure freeboard 36 in. of total depth 144 + in.

7. Do facility personnel perform routine visual inspections of the storage structures? ☒ YES ☐ NO

8. Are the routine visual inspections documented? ☒ YES ☐ NO

9. Does the system have an outfall or discharge point? ☐ YES ☒ NO

If "YES", please provide a description (overflow pipe, spill way, etc. Include a description the area receiving the discharge).

None

10. Are there any portions of the production area where runoff is not controlled? ☐ YES ☒ NO

If "YES", provide a detailed description of the area(s) of concern:

None

MORTALITIES MANAGEMENT

1. How are mortalities managed? (Composted, buried, burned, rendering service, other)

Facility has permitted incinerators.

2. Are mortalities documented and are records kept? ☒ YES ☐ NO

FACILITY WATER SOURCES

1. What type of method is used to provide drinking water for the animals?
☐ Overflow waters ☐ Tip Tanks ☒ Nipple waters ☐ Water Bowls ☐ Other _____
2. How is the water for animals obtained?
☒ Community PWS ☐ On-Site Well ☐ On-Site Impoundment ☐ Other _____
3. Is a mist cooling system used? ☐ YES ☒ NO
 How is mist water contained?
None

DAIRY OPERATION (If No Dairy, skip this section)

1. How many times per day are cows milked? _____
2. Describe how the dairy's non-contact cooling water is contained (Example: it is reused for drinking water for the animals).
None
3. Describe how the milking parlor is cleaned (hose or flush) and where the process wastewater goes and how it is contained.
None
4. Describe how the tank(s) are washed and where the process wastewater goes and how it is contained.
None
5. Describe where process wastewater from the plate cooler goes and how it is contained.
None

BEDDING (If No Bedding, skip this section)

1. Describe what type of bedding is used for the animals.
None
2. Describe how bedding is collected and how often.
None
3. What is done with the used bedding? ☐ Reused ☐ Land Applied

MANURE COLLECTION

1. How is manure collected?

- ☒ Under Floor Pit
☐ Scraped: ☐ Automatic ☐ Manual
☐ Flush
☐ Solids Separator
☐ Other: _____
☐ None

2. If manure collection system uses either clean or reused water to flush, describe where this water goes and how it is contained.

None**FEED STORAGE CONTAINMENT**

1. Describe how feed (silage, hay, etc) is contained.

- ☒ Bulk Bins
☐ Silage Pit
☐ Ag Bags
☐ Hay: ☐ Barn ☐ Outdoor
☐ Other: _____

2. Describe how feed (silage, hay, etc) runoff is contained.

- ☒ Not Applicable – Feed totally enclosed
☐ Other: _____
☐ None

RECEIVING SURFACE WATERS

1. Provide a description of the flow path from the facility to the nearest named surface water.

A tributary of Big Creek flows through the facility property.

2. What is the name of the receiving stream?

Big Creek3. Status of the named surface water: ☐ Intermittent ☒ Perennial4. Are any unnatural bottom deposits observed in the receiving stream: ☐ YES ☒ NOIf "YES", provide a description of the deposits: **None**

DISCHARGES

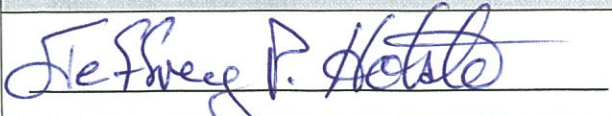
1. Have there been any documented discharges of livestock waste to surface water <i>in the past year</i> ? If "NO" proceed to question 2.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
a. If "YES", specify the date(s). _____		
b. What was the reason for the discharge?		
c. Was the discharge the result of a 25 year-24 hour rainfall event?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
d. What was the precipitation amount? (if applicable)		
e. Was IEMA notified of the discharge?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
f. Has the facility taken corrective action to remedy the situation which caused the discharge(s)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If "YES", describe actions taken: None		
2. Is the facility currently discharging livestock waste from the production area? If "NO" proceed to next section.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
a. Was the discharge the result of a 25 year-24 hour rainfall event?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
b. What was the precipitation amount? (if applicable)		
c. What is the reason for the discharge?		
d. Were water quality samples taken?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
e. If "YES", how many? _____		
f. What parameter(s) tested? <input type="checkbox"/> pH <input type="checkbox"/> Ammonia <input type="checkbox"/> Nitrate <input type="checkbox"/> Nitrite <input type="checkbox"/> Phosphorus <input type="checkbox"/> BOD ₅ <input type="checkbox"/> Total Susp Solids <input type="checkbox"/> Fecal <input type="checkbox"/> Diss O ₂ <input type="checkbox"/> Other _____		

BIOSECURITY – Inspection Activities

1. Were biosecurity measures discussed with the facility prior to inspection?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
2. Has there been 24-hours downtime between inspections for all IEPA personnel present?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
3. Was the order of inspection conducted from high risk to low risk?	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
4. Did all personnel stay outside livestock management and livestock waste handling facilities as defined in 35 IAC 501.285 and 35 IAC 501.300? If "YES" skip to question 7.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO

BIOSECURITY – Personal Protection Equipment

5. Was sanitary footwear donned prior to entering the livestock management/waste handling facility(s)?	<input type="checkbox"/> N/A Did not Enter	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
6. Were disposable coveralls donned prior to entering the livestock management/waste handling facility(s)?	<input type="checkbox"/> N/A Did not Enter	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
7. Was sanitary footwear used during the inspection?		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
8. Was disposable sanitary outerwear disposed at the facility?		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

BIOSECURITY – Vehicle			
9. Was the vehicle parking location discussed with the facility prior to inspection?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
10. Was the vehicle washed since the inspection prior to current? If "YES" skip question 11.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
11. Was the vehicle parked >300-feet from the livestock management/waste handling facility? Explain where vehicle was parked:	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES	<input type="checkbox"/> NO
12. Was IEPA vehicle used on site?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
13. Was facility vehicle used on site?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
BIOSECURITY – Inspection Equipment			
14. Was all equipment wiped down with anti-bacterial wipes?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
15. Was sample cooler kept inside vehicle during inspection? If "YES" skip question 16.	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
16. Was sample cooler wiped down with antibacterial wipes before placing back into vehicle?	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES	<input type="checkbox"/> NO
OTHER COMMENTS/NOTES			
<p>Facility was originally constructed in the early 1990's by Heartland Pork.</p> <p>CFM owns very little cropland near the facility and relays on neighboring property owners for application ground. Any application performed near a residence is typically that of one of these land owners.</p> <p>Facility is neat and well maintained.</p>			
Check all attachments: <input type="checkbox"/> Narrative <input type="checkbox"/> Photos <input checked="" type="checkbox"/> Site Plan <input type="checkbox"/> Sample Results			
INSPECTOR'S SIGNATURE		REPORT DATE	
		July 2, 2012	

Christensen Farms Midwest, LLC
Bell Ridge Facility
May 30, 2012



Main Entrance

Fresh Water Pond
Primary Lagoon
Secondary Lagoon